

## **INTRODUCTION**

### **Foreword**

The California Department of Aging (CDA) and the statewide network of 33 Area Agencies on Aging (AAA) share the critical responsibility of addressing present and future aging and long-term care issues within California's growing, diverse, interdependent community. Each must support the other in a broad range of activities directed at overcoming and eliminating barriers to the development of coordinated and accessible home and community-based systems of care.

The Area Plan is intended to accurately reflect future activities of the AAAs by involving and serving older individuals, their families, and caregivers. It provides the format and structure to identify needs and address concerns in a manner consistent with the Older Americans Act (OAA) and the Older Californians Act (OCA) to enable communities and AAAs to plan for the future.

### **The Role of Area Agencies on Aging**

As general background for the reader, the AAAs were created by the OAA with a mandate to serve as visible and effective leaders and advocates and to provide local leadership in accomplishing federal program goals. These goals are specified broadly in the OAA as: 1) to serve and maintain maximum independence and dignity in a home environment for older individuals capable of self care with appropriate supportive services, including support to family members and other persons providing voluntary care to older individuals needing long-term care services; 2) to remove individual and social barriers to economic and personal independence for older individuals; and 3) to provide the opportunity for older individuals to receive managed in-home and community-based long-term care services. The 1996 revision of the OCA reiterates federal requirements to facilitate the development of home and community-based systems of care and adds increased responsibility for AAAs to oversee a number of State-funded programs and subsequent expansion monies, which previously were managed at the State level.

Area Agencies are charged with addressing and planning for a broad spectrum of matters related to involvement of older individuals' needs in our rapidly changing society. These individuals live in a variety of settings within local communities, including long-term care facilities. They include the poor, low-income minority individuals, those who are frail, isolated, neglected, and exploited; those with limited English-speaking ability, and those dealing with the problems of dementia or cognitive impairment, as well as those with caregiver responsibilities. These groups also include a dramatic increase of individuals who will become seniors during the 2005-2009 planning cycle and beyond. Wherever AAAs are placed organizationally, they are charged with working proactively in the collaborative development of home and community-based systems of care, which are responsive to the needs of diverse populations, including adults with disabilities.

## **The 2005-2009 Area Plan and Annual Updates**

The goals put forth in the Reference Guide for the Development of the 2005-09 Area Plan include meaningful planning activities to help eliminate fragmentation in California's system of services, taking advantage of new opportunities for service delivery, and insuring that maximum benefits are obtained through efficient delivery of services to those most in need. A planning process diagram describing the planning process is included in the Reference Guide. (See *Appendix IX Resource Tools Exhibit B*).

This Reference Guide continues to emphasize CDA's goal of providing AAAs with technical assistance and support. Subsections list the "Purpose," "Required Content," and as applicable, "Questions". The Questions section will assist AAAs in meeting the Required Content section. The establishment of goal areas and related objectives should be driven by existing mandates and analysis of each AAA's unique needs, as identified in the needs assessment for the individual Planning and Service Area (PSA). An Area Plan should read logically and easily, with each section leading into and supporting the next. The Area Plan should be viewed as a document that not only fulfills the mandates set forth in law, but also informs the public and policy-makers, locally and statewide, how the AAA plans to address local needs and accomplish stated goals and objectives.

Critical to the four-year planning cycle, the yearly Area Plan Update process enables the AAA to re-examine its direction and progress as a result of changing circumstances and to add, change, or delete elements and objectives, as appropriate. The Area Plan is a four-year living document that is formatted for the insertion of annual updates. Notations at the beginning of each section and this symbol ☐ will alert the AAA to those sections that require updates throughout the four-year planning cycle. AAAs are required, as specified, to submit annual Updates. Formal instructions for submission of the Area Plan Updates, Amendments, and Year-End Reports are located in Part Three of the Reference Guide.

As in the previous plan, evaluation will lead to the Year-End Report, which provides the opportunity to review and assess efforts during the previous year, to identify accomplishments and factors influencing them, and to share this information with CDA and be accountable to the public.




## **Instructions for Completion of the Area Plan**

Instructions for completion of the body of the four-year Area Plan are divided into two primary parts:

- Part One: Area Plan Background - The Reference Guide does not include a prescribed format for this portion of the Plan. Therefore, the Required Content may be submitted in narrative form.

- Part Two: Area Plan Goals and Objectives - The Reference Guide provides a specific format for submission of goals, objectives, and maintenance of the goals and objectives for the Four-Year Area Plan. Part Two also provides instructions for completing and maintaining the Service Unit Plan Objectives for the four-year period.

Icons appear throughout the guidance to direct the reader's attention to specific requirements:

-  indicates that a prescribed template has been formatted for electronic completion. (Detailed instructions are provided on the next page of this section.)
-  are positioned to alert the reader to sections that contain "Required Content" directions that must be followed.
-  identifies sections of the Area Plan that must be updated annually.

### **Applicable Laws and Regulations**

- The Older Californians Act can be found in the Welfare and Institutions (WIC) Code, Division 1.8, Section 9000 et seq.
- CDA regulations are found in the California Code of Regulations (CCR), Title 22, Section 7000 et seq.
- The Older Americans Act can be found in the United State (US) Code, Title 45, Chapter 35, Sections 3002 et seq.
- Federal regulations for Title III can be found in the Code of Federal Regulations (CFR), Title 45, Part 1321, Section 1321 et seq.
- Federal regulations for Title V can be found in the CFR, Title 20, Part 641, and Title 20, Part 89. The regulations are located within Part IV, Department of Labor

### **Instructions for Electronic Entry and Submission of the documents of the Area Plan and Updates**

**Updates**: These instructions also apply to the completion of annual Updates to the four-year plan, which will be due on May 1 of 2006, 2007, and 2008.

Electronic entry and submission is required for the documents listed on this page. As entries may change the page numbers when you complete the entire Four-Year Area Plan, reformat the document with page breaks to assure the information is paginated appropriately.

The original with original signatures on the Transmittal Letter and two copies of the Area Plan must be sent to CDA at:

**California Department of Aging  
Area Plan Team/Denny Wight  
1300 National Drive Suite 200  
Sacramento, CA 95834**

**In addition to mailing the Area Plan submit the following documents electronically to**

**[Dwight@aging.ca.gov](mailto:Dwight@aging.ca.gov) All documents must be in Word.**

- Service Unit Plan (SUP)
- Needs Assessment Activities (either send the page it is on in the Area Plan or move the information to a separate document.)
- Appendix XI Disaster Preparation Planning
- Appendix XII Baby Boomer Information
- Program Development and Coordination Narrative Objectives

### **Transmittal Letter**

☐ **Updates:** A new Area Plan Transmittal Letter, with the original signatures of all appropriate individuals, is required with each annual Update. The **year of submittal** must be annotated or checked at the top of the document.

☐ **Year-End Report:** A Year End Report Transmittal Letter with original signatures of all appropriate individuals is required with each Year-End Report. The year of submittal must be checked at the top of the document.

A Transmittal Letter is required for the Four-Year Area Plan. Required Transmittal Letter language is on page iv. The language of the Transmittal Letter has been changed to reflect AAA accountability relative to the Assurances in Part V. The completed 2005-2009 Area Plan Transmittal Letter needs to include your PSA number and official name of the appropriate governing body (Board of Directors, Governing Board, etc.) with signatures typed on the document. **Original signatures are required on the Transmittal Letter.** The AAA may copy and paste the Transmittal Letter onto Agency Letterhead. The Transmittal Letter is to be placed behind the title page of the 2005-2009 Area Plan. Transmittal Letters are required to be updated and submitted on an annual basis.

### **Area Plan Checklist**

☐ **Updates:** A new Area Plan Checklist must be completed and remitted with each Area Plan Update.

The Area Plan Checklist is intended to provide AAAs with a tool to review the Area Plan for completeness prior to submission. AAAs must complete the checklist, located on page v, for the Four-Year Area Plan and all Area Plan Updates.

## TRANSMITTAL LETTER

AAA Name: \_\_\_\_\_

PSA Number: \_\_\_\_\_

**Check appropriate box for:**

☐ 2005-09 Area Plan    ☐ FY 06-07    ☐ FY 07-08    ☐ FY 08-09

This Area Plan is hereby submitted to the California Department of Aging for approval. The Governing Board and the Advisory Council have each had the opportunity to participate in the planning process and to review and comment on the Area Plan. The Governing Board, Advisory Council, and Area Agency Director actively support the planning and development of community-based systems of care and will assure compliance with the assurances set forth in this 2005-2009 Area Plan. The undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their families and caregivers in this planning and service area.

1. (Type Name) \_\_\_\_\_  
(Signed)<sup>1</sup> \_\_\_\_\_  
Chair, Governing Board

\_\_\_\_\_  
Date

2. (Type Name) \_\_\_\_\_  
(Signed) \_\_\_\_\_  
Chair, Advisory Council

\_\_\_\_\_  
Date

3. (Type Name) \_\_\_\_\_  
(Signed) \_\_\_\_\_  
Director, Area Agency on Aging

\_\_\_\_\_  
Date

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<sup>2</sup> For the e-mailed version of the Area Plan, type in name and signatures. Original signatures are required on posted Area Plan.

## **THE AREA PLAN CHECKLIST**

Includes Title III (B, C, D, E), V, VII, Community-Based Service Programs (CBSP), and the HICAP.

**Instructions:** Check the boxes ☐ for completed items, as applicable. For completion of the Four-Year Plan, check the boxes in column C. For any unchecked box, provide an explanation on the last page of this checklist. For Annual Updates, check the boxes in the applicable year. **Section number six, Narrative Description of Relevant Changes, applies only to the Area Plan Update.**

### **1. Necessary Copies and Format**

#### **REQUIRED**

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>General Requirements for the Four-Year Plan</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four-Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>
All information is provided on single-sided sheets.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One copy of the <u>required documents</u> has been E-mailed to the Department.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An original and two copies of the Area Plan, Area Plan Checklist, and all required documents are attached.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### **2. Transmittal Letter**

#### **REQUIRED**

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>General Requirements for the Four-Year Plan</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four-Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>
The Transmittal Letter signed by the AAA Director, Chair of the Advisory Council, and Chair of the Governing Board, has original signatures and is attached. *	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The signed Transmittal Letter will be submitted by: <input type="text"/> (enter date)	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*Note: Approval of the Area Plan will be delayed pending receipt of a fully executed Transmittal Letter.

### 3. Strategic Plan: REQUIRED if a Strategic Plan is submitted as the Area Plan

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A Strategic Plan was submitted as the Area Plan. (A Strategic Plan Cross Reference Index is available by contacting CDA).	Yes, If applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 4. Description of the Planning and Service Area (PSA) REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A brief description of the physical characteristics of the PSA is included.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of the demographic characteristics of the PSA is included.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of the unique resources and constraints existing within the PSA is included.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A broad description of the existing service system within the PSA is included.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 5. Description of the Area Agency on Aging REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-Year Plan	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update
A description of the type and characteristics of the AAA.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A Mission Statement.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A current Organization Chart.	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of how the AAA provides visible leadership in	Yes, If changed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



the development of community-based systems of care.					
The Agency type; such as Public, Private Non-Profit, or Joint Powers.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The AAA's funding sources.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 6. Narrative Description of Relevant Changes – REQUIRED FOR UPDATE ONLY

*This section must include all changes related to all programs of services funded by grants from CDA*

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>Update Requirement</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>
Introduction with Narrative Description of Significant Changes, including estimated number of low-income, minority seniors	<b>Yes</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New, continued, revised, completed, or deleted goals and objectives are identified.	<b>Yes</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussion of major changes and effects to the PSA and/or AAA.	<b>Yes</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Changes that may have reduced or increased quality or quantity of service.	<b>Yes</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 7. The Planning Process

## REQUIRED

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>General Requirements for the Four-Year Plan</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four-Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>

Discussion of steps involved in the planning process and how they fit in with the overall planning cycle.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussion of the needs assessment process.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussion of targeting.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identification of priorities.	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**8. Goals and Objectives, including Targeting, Needs Assessment, and Service Unit Plan REQUIRED**

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>
<b>General Requirements for the Four-Year Plan</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four-Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>
A goal and/or objective is identified for each program or service.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goals and Objectives are included for each program or service funded by the AAA from the following sources: Check all that apply <input type="checkbox"/> Title III B <input type="checkbox"/> Title III B/VII(a)(b) <input type="checkbox"/> Title III C1 <input type="checkbox"/> Title III C2 <input type="checkbox"/> Title III D <input type="checkbox"/> Title III E <input type="checkbox"/> Title V <input type="checkbox"/> HICAP <input type="checkbox"/> CBSPs	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goals and objectives identified serve to create, expand, or enhance AAA direct or contracted services.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title III B Program Development (PD) and Coordination (C) activities are distinctly identified.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Objectives clearly indicate the nature of the action, the party responsible for the action, the outcome of the action, how the action will be measured, and projected start and end dates of each objective.	<b>Yes.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Units of Service on the SUP are tied to a specific goal.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>General Requirements for the Four-Year Plan</b>	<b>Annual Update Requirements</b>	<b>2005-09 Four-Year Plan</b>	<b>2006-07 Annual Update</b>	<b>2007-08 Annual Update</b>	<b>2008-09 Annual Update</b>
<b>Targeting</b> criteria have been met and are included:⇒Specific objectives: for providing services to low-income minority individuals; ⇒Specific objectives for providing services to older individuals with disabilities, with particular attention to individuals with severe disabilities; ⇒Specific objectives for providing services to older individuals with limited English-Speaking ability; and ⇒Specific objectives for providing services to caregivers	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A description of <b>Needs Assessment Activities</b> is included.	<b>Yes, If needs assessment activities are planned or have been completed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Service Unit Plans</b> are complete and reconcilable with appropriate budgets.	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 9. Older Americans Act Assurances

Older Americans Act Assurances	<b>No</b>	<input type="checkbox"/>			
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### 10. Appendices

### REQUIRED, IF CHANGES HAVE OCCURED

IA. Notice of Intent to Provide Direct Services (if applicable)	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IB. Request for Approval to Provide Direct Services (if applicable)	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Public Hearings	<b>Yes</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. Governing Board	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV. Advisory Council	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Priority Services	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI. Community Focal Points List	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VII. Multipurpose Senior Center Acquisition and Construction Compliance Review	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIII. Title III E Family Caregiver Support Program	<b>Yes, If changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IX. Resource Tools Sample Organization Charts, Planning Process and Funding Sources/Program Descriptions, Title IIID Fact Sheet, Ombudsman Fact Sheet	<b>No</b>				
X. Legal Services	<b>Yes, if changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
XI Disaster Preparation Planning	<b>Yes, if changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
XII Baby Boomer Information	<b>Yes, if changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
XIII Required Services without the use of Federal and/or State Funds	<b>Yes, if changed</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**For any unchecked boxes, identify the section number and provide an explanation:\_\_\_\_\_**